The purpose of the LIHEAP/Energy Share Emergency Assistance Program is

- 1)To help you with your current emergency, and

To help you avoid similar problems in t	2)To help you avoid similar problems in the future.		
To help you with the present emergency, your application for assistance with the following has been approved:			
PROBLEM STATEMENT. The problems we	discussed during our interview that may	have caused this emergency are:	
·	,	ű,	
ACTION PLAN		COMMENTS:	
The recommended actions you can take to h	elp avoid future emergencies are		
checkmarked:			
Negotiate a reasonable payment plan	with your energy supplier.		
2. Obtain and use weatherization and/or	conservation information from your		
energy supplier or Community Action	Agency.		
3. Participate in counseling with:			
4. Apply for:			
пирру юп.			
Energy Share/County Social Service Board v			
However, it is your responsibility to keep you	• •	•	
work for you. If you apply for Emergency As to succeed with your Action Plan.	sistance again, the approval of additiona	ii payments may depend upon your enorts	
I give my permission to County Social Service	e Board/Energy Share to make referrals	to the above agencies, to share information	
about my circumstances, and to request and receive a progress report from the above agencies. This Release of Information			
will be valid for 12 months. (Name of County	Social Service Board/Energy Share)		
Applicant:		Date:	
Agency Representative:	County:	Date:	

Canary - CSSB or Energy Share CC: White - Applicant